

CIVIL COMPLAINT FORM TO BE USED BY A *PRO SE* PRISONERIN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIATerrance Terrell Hopson 05-25580

Full Name of Plaintiff

Inmate Number

v.

Harry Entz

Name of Defendant 1

Joseph DeFrancesco

Name of Defendant 2

Sheila Lain

Name of Defendant 3

Tucker Frey

Name of Defendant 4

Curtis Winner

Name of Defendant 5

(Print the names of all defendants. If the names of all defendants do not fit in this space, you may attach additional pages. Do not include addresses in this section).

Amended Complaint

Civil No. 1:21-CV-01944

(to be filled in by the Clerk's Office)

☒ Demand for Jury Trial☐ No Jury Trial DemandFILED
SCRANTON

APR 29 2022

PER [Signature]
DEPUTY CLERK

I. NATURE OF COMPLAINT

Indicate below the federal legal basis for your claim, if known.

☒

Civil Rights Action under 42 U.S.C. § 1983 (state, county, or municipal defendants)

☐Civil Rights Action under Bivens v. Six Unknown Federal Narcotics Agents, 403 U.S. 388 (1971) (federal defendants)☐

Negligence Action under the Federal Tort Claims Act (FTCA), 28 U.S.C. § 1346, against the United States

II. ADDRESSES AND INFORMATION

A. PLAINTIFF

Hopson, Terrance, T
Name (Last, First, MI)
05-25580
Inmate Number
Lycoming county prison
Place of Confinement
277 west third street
Address
Williamsport, Lycoming, PA, 17701
City, County, State, Zip Code

Indicate whether you are a prisoner or other confined person as follows:

- ☐ Pretrial detainee
☐ Civilly committed detainee
☐ Immigration detainee
☒ Convicted and sentenced state prisoner
☐ Convicted and sentenced federal prisoner

B. DEFENDANT(S)

Provide the information below for each defendant. Attach additional pages if needed.

Make sure that the defendant(s) listed below are identical to those contained in the caption. If incorrect information is provided, it could result in the delay or prevention of service of the complaint.

Defendant 1:

Entz Harry
Name (Last, First)
Lieutenant / Supervisor
Current Job Title
277 west third street
Current Work Address
Williamsport, Lycoming, PA, 17701
City, County, State, Zip Code

Defendant 2:

Defrancesco, Joseph

Name (Last, First)

Sergeant/Supervisor

Current Job Title

277 West third Street

Current Work Address

Williamsport, Lycoming, PA, 17701

City, County, State, Zip Code

Defendant 3:

Lain, Sheila

Name (Last, First)

LPN

Current Job Title

277 West third street

Current Work Address

Williamsport, Lycoming, PA, 17701

City, County, State, Zip Code

Defendant 4:

Frey, Tucker

Name (Last, First)

Correctional Officer

Current Job Title

277 West third street

Current Work Address

Williamsport, Lycoming, PA, 17701

City, County, State, Zip Code

Defendant 5:

Winner, Curtis

Name (Last, First)

Correctional Officer

Current Job Title

277 West third street

Current Work Address

Williamsport, Lycoming, PA, 17701

City, County, State, Zip Code

III. STATEMENT OF FACTS

State only the facts of your claim below. Include all the facts you consider important. Attach additional pages if needed.

A. Describe where and when the events giving rise to your claim(s) arose.

Lucas County prison 10-2-21 to present date

B. On what date did the events giving rise to your claim(s) occur?

10-2-21, 10-2-21-10-14-21, 11-4-21-12-24-21, 10-27-21
10-27-21

C. What are the facts underlying your claim(s)? (For example: What happened to you?
Who did what?)

Please see Attached document.

Statement of fact III

1. Lt. Entz, and C.O. Frey where both acting under the color of state law, on October 2nd, 2021 around 12:20 pm, when C.O. Frey opened J-54 telling me (Terrance Hopson) I could use the phone/kiosk leading me to be Assaulted by Lt. Entz. Excessive force was used, when Lt. Entz grabbed/choked me by neck cutting off full air supply & attempted to slam me by my neck, showing disregard for my safety of physical harm, knowingly & or Recklessly, also showing deliberate indifference. your Affiant avers that the defendants violated my constitution rights with a culpable state of mind.

2. October 2nd 2021 12:30 pm Lt. Entz was acting under the color of state law in his official capacity when he ordered C.O. George, C.O. Kuhns, C.O. Marshall and C.O. Sines, and Allowed the officers to assault me on the Elevator while in hand cuffs, as well as intake.

2.B. your affiants avers that the defendant violated my constitutional rights, with a culpable state of mind knowingly disregarded an excessive risk to my health and safety such that they were deliberately indifferent inflicting Cruel & Unusual punishment, and used Excessive force, causing injuries.

Statement OF Fact III

Pg. 2.

3.A From October 2nd 2021 - October 14th 2021 Lt. Entz, Sgt. DeFrancesco, C.O. Frey, C.O. winners and nurse Sheila violated my constitutional rights, with a culpable state of mind knowingly disregarded an excessive risk to my health and safety such that they were deliberately indifferent.

3.B. October 2nd 2021 - October 14th 2021, I was placed in MSMU (male special management unit) cell 67, without receiving any medical attention after being assaulted 3 times. Furthermore the plaintiff avers he (Terrance Hopson) stated his injuries to all defendants verbally & via request slip, as well as chronic medical condition.

3.C Under the cruel and unusual punishment clause, deliberate indifference was shown by keeping me in a cell where the light does not go off, without the 5 eye drops needed daily as prescribed by my doctor. For a minimum of 10 days (no meds) knowingly that All ultra violet light causes severe/chronic inflammation, burning, swelling and damage to my eyes. The plaintiff notified all defendants on multiple occasions verbally as well as direct, via request slip and did not see a doctor until a month later. Later doctor noticed wound and eventually performed surgery to attempt to recover lost vision. Wound in right eye, loss of vision in both.

Statement of Fact III pg 3

4.A On October 27th 2021 around 7:40 - 8:00am, C.O. Winner & C.O. Martin violated my rights and used excessive force with a culpable state of mind. Returning From gym, both officers slammed me on glass/wall of I-pod by my neck & wrist, one choking as C.O. Winner stated "he was not Lt. Entz" referring directly to 10-2-2021 incident in paragraph 1A.

4.B. The plaintiff avers the defendant knowingly disregarded an excessive risk to my health & safety with a malicious intent to cause harm, inflicting a cruel and unusual punishment, by using excessive force.

5.A. October 18 2021, Sgt. DeFrancesco Acted under the Code of state Law in his official capacity by showing deliberate indifference. 10-18-21 at approximately 7:35 or around, I was being chased by a inmate who assaulted me, for a extended period of time. After my assault staff responded, upon arrival, Sgt. DeFrancesco stated "As much as you run your mouth, you shouldn't of ran like a bitch". The plaintiff later received a misconduct stating in exact "I Looked into gym and saw inmate Acosta chasing inmate Hopson around gym so I observed them for a little while longer". Failure to intervene under Sgt. DeFrancesco supervision, knowingly acting indifferent to my risk of harm deliberately.

Statement OF Fact III Pg. 4

6.A Nurse Sheila was acting under the color of state law from December 4th 2021 until sometime after December 18th 2021. The plaintiff aver's the defendant knowingly and or debiberately disregarded an excessive risk to my health, by failing to Refills prescribed my eye Drops as requested by plaintiff via request slip and as requested by prescribed doctor.

6.B The plaintiff aver's the defendant disregarded and delayed Dr. Hartzels prescriptive Plan. I (Terrance Hopson) Visited Dr. Hartzel, in December, he notified me my eye pressure was in the 40's & anything over 30 can cause glaucoma. The specific eye drop requested to be refilled via request slip handled by the defendant Sheila Lain, would relieve the pressure.

3-23-22 Dr. Hartzel performed surgery on eye as mention in paragraph 3.C, due to vision loss.

6.C. From 3-13-22 - 3-31-22 I was housed in msu again after Doctor notified nurse supervisor about the inflammation risks (as mentranced in 3.C.) after surgery debarate disregard to risks of my health.

6.D. From 3-13-22 to 3-31-22 The plaintiff's constitutional right was violated by Not being Allowed to use Law library due to housing Assignment.

IV. LEGAL CLAIM(S)

You are not required to make legal argument or cite any cases or statutes. However, state what constitutional rights, statutes, or laws you believe were violated by the above actions. If you intend to assert multiple claims, number and set forth each claim in separate paragraphs. Attach additional pages if needed.

8th Amendment, under cruel & unusual punishment clause
 Deliberant indifference, officials aware of harm/risks of harm
 14th Amendment, due process right, cruel & unusual punishment
 clause
 5th Amendment - Due process right
 4th Amendment right
 6th Amendment right
 1st Amendment right

V. INJURY

Describe with specificity what injury, harm, or damages you suffered because of the events described above.

Wound in right eye, Loss of vision in Left, Left hand scratch
 right foot scratch, and Left ear, Emotional damages
 + traumatic experience

VI. RELIEF

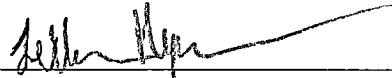
State exactly what you want the court to do for you. For example, you may be seeking money damages, you may want the court to order a defendant to do something or stop doing something, or you may be seeking both types of relief. If you are seeking monetary relief, state your request generally. Do not request a specific amount of money.

monetary relief, \$600,000 and payments for all my
 medical expenses for life (eye examine/surgery visits)

VII. SIGNATURE

By signing this complaint, you represent to the court that the facts alleged are true to the best of your knowledge and are supported by evidence, that those facts show a violation of law, and that you are not filing this complaint to harass another person or for any other improper purpose.

Local Rule of Court 83.18 requires *pro se* plaintiffs to keep the court informed of their current address. If your address changes while your lawsuit is being litigated, you must immediately inform the court of the change in writing. By signing and submitting the complaint form, you agree to provide the Clerk's Office with any changes to your address where case-related papers may be served, and you acknowledge that your failure to keep a current address on file with the Clerk's Office may result in dismissal of your case.



Signature of Plaintiff

4-26-22

Date

Terrance T. Hopson 05-25580
Lycoming County Prison
277 West Third Street
Williamsport PA 17701

RECEIVED
SCRANTON

APR 23 2022

PER DEPUTY CLERK

Office of Clerk

United States District Court

Middle District of Pennsylvania

235 North Washington Avenue

P.O. Box 1148

Scranton, PA 18501-1148

NEOPOST
04/27/2022
\$001.569
ZIP 17701
041041456579